

TITLE 467
TITLE V SERVICES FOR MEDICALLY HANDICAPPED CHILDREN,
GENETICALLY HANDICAPPED PERSONS' PROGRAM,
AND SUPPLEMENTAL SECURITY INCOME-DISABLED CHILDREN'S PROGRAM

CHAPTER 1-000 ADMINISTRATION

1-001 Introduction: The Medically Handicapped Children's Program (MHCP) includes Title V Services for Medically Handicapped Children, the Genetically Handicapped Persons' Program, and the Supplemental Security Income-Disabled Children's Program.

1-001.01 The purpose of the Medically Handicapped Children's Program is to develop, improve, and strengthen standards and services for children with special health care needs and –

1. To promote systems development to improve the organization and delivery of high quality services for children with special health care needs and their families with an emphasis on community-based services.
2. To promote coordinated comprehensive care within a medical home.
3. To provide culturally competent services and support by assisting families of children with special health care needs within a community and to identify and meet their needs through coordination of informal and formal support(s).
4. To develop, promote, and improve the standards of care for children with special health care needs.
5. To promote efforts that emphasize early evaluation and treatment, health-related education and advocacy in order that children with special health care needs and their families may maximize their full potentials.
6. To increase public awareness through the establishment of outreach efforts.

1-001.02 Legal Basis: Title V Services for Medically Handicapped Children is administered under Public Law (P.L.) 97-35, Subtitle D, Section 501(a)(4), under "Title V Maternal and Child Health Services Block Grant", and Neb. Rev. Stat. Sections 43-522, 68-309, and 68-717.

The Genetically Handicapped Persons' Program is a program for adults with cystic fibrosis, hemophilia, and sickle cell disease established by Neb. Rev. Stat. Sections 68-1401 to 68-1406.

The Supplemental Security Income-Disabled Children's Program (SSI-DCP) administered in Nebraska by the Nebraska Department of Health and Human Services is part of the Maternal and Child Health block grant.

1-001.03 Funding: MHCP is funded by a federal block grant and state monies appropriated by the Legislature. The Department may set priorities of services and service components based on available funding. Donations may be accepted.

1-001.04 Confidentiality: See 465 NAC 2-005 ff.

1-001.05 Non-Discrimination: See 465 NAC 2-001 ff.

1-002 Definitions: The following definitions apply within this title.

Active Treatment means treatment which is directed immediately to the cure, maintenance or improvement of the client's medical condition.

Acute Condition means a medical condition having a sudden onset, sharp rise, and a short course.

Certification means a process in which the client is approved for a specific individual medical treatment plan and is determined financially eligible; authorization for specific care is then approved.

Chronic Condition means a medical condition that is slow in its progress and long in duration which can be improved or maintained through active medical treatment or stabilized.

Client means an individual who has been referred to, has applied for, or is certified for MHCP.

Clinic means a process in which MHCP-contracted or approved medical specialists, including the family evaluate the client and formulate the individual medical treatment plan (IMTP) in an MHCP-designated setting.

Consultative Services means any medical evaluation which is likely to assist in determining a diagnosis and the IMTP.

Deductions means those items that are directly subtracted from the family's countable income and resources before comparison to the MHCP financial guidelines to determine financial eligibility.

Diagnostic Services means any medical evaluation approved by MHCP to provide a diagnosis and the IMTP.

Emancipated Minor means when determining financial eligibility, a child age 18 or younger who is considered an adult because s/he has-

1. Married; or
2. Moved away from the parent(s)' home and is not receiving support from the parent(s).

Family means a unit consisting of one or more adults (individuals age 19 or older) and one or more children related by blood, marriage, or adoption who are considered members of the household unit. An unborn child may be included if proof of pregnancy is obtained. The following are considered separate families:

1. Related adults other than spouses and unrelated adults who reside together;
2. Children living with non-legally responsible relatives; and
3. Emancipated minors.

Financial Margin means twenty-five percent of the amount by which the family's countable income and resources exceed the MHCP financial guidelines minus the disregard and financial margin deductions. See 467 NAC 2-004.06.

Financial Margin Deductions means those items that are subtracted from the financial margin to determine any amount that the client, parents, or guardian must obligate on the client's medical care. See 467 NAC 2-004.06A.

Individual Medical Treatment Plan (IMTP) means a written individualized plan developed by an MHCP-contracted physician specialist or a clinic team which prescribes specific treatment and/or diagnostic evaluation.

Maximum Benefit means the point at which the client has received all the medical services that MHCP is able to provide for that client's condition; also when no active treatment plan is recommended.

Medically Handicapped (Children with Special Health Care Needs) means children under twenty-one years of age who experience an orthopedic condition, cerebral palsy, cystic fibrosis, heart disease, an eye problem amenable to surgery, an oral plastic handicap, mid-line birth defect, hearing problem, neoplasm, or any other major illness which is disabling or will lead to a disability and for which an active treatment plan is indicated. Care for acute conditions, such as infectious disease, appendectomy, or simple fractures, is not covered under this program.

Multi-Disciplinary Team means a team of specialized personnel contracted by MHCP to assess clients with specific conditions and to provide IMTP's at MHCP-sponsored clinics.

Prudent Person Principle means the practice of assessing all circumstances regarding case eligibility and using good judgment in requiring further verification or information before determining initial or continuing eligibility.

Referral means an action by which a family or individual desires to receive services for children with special health care needs is made known to an office of the Department of Health and Human Services.

Specialized Physician means an individual with a degree of Medical Doctor, or its equivalent, from an accredited medical school, who has been recognized and certified by a specific academy (suborganization) of the American Medical Association by having completed the mandatory course of study and having passed an examination which entitles membership as a recognized specialist in a specific body of knowledge.

1-003 Cooperative Responsibilities: The system by which Medically Handicapped Children's services are provided is a cooperative undertaking by volunteers, Department staff, and the client, parent(s), or guardian.

1-003.01 Responsibilities of the Client, Parents, or Guardian: The client, parent(s), or guardian must -

1. Notify the MHCP services coordinator before receiving services at scheduled appointments and laboratory tests;
2. Keep all appointments for care and services;
3. Follow the individual medical treatment plan;
4. Notify the MHCP services coordinator of emergency care and hospitalizations within five working days;
5. Obligate payment for that part of the treatment which has been agreed upon by MHCP and the client or has been determined to be the client's responsibility;
6. Assume responsibility for general health care for the client;
7. Ensure that the appropriate provider receives payment from health insurance funds, if available, before MHCP pays for any service by supplying necessary information and forms to the provider or by filing claims with an insurance company if necessary;
8. Report accurate financial and social information;
9. Report a change of address, household size, or income within ten days following the change; and
10. Participate in any MHCP financial and/or medical eligibility review.

Note: The responsibilities of the child's parent or guardian for the SSI-DCP are listed in 467 NAC 6-001.04.

1-003.02 Responsibilities of Services Coordinator: The services coordinator must -

1. Accept referrals for MHCP and DCP services;
2. Assist the parent(s) or guardian in the application process;
3. Conduct needs assessments with the family;
4. Determine financial eligibility for the MHCP Title V and Genetically Handicapped Persons' Program (see 467 NAC 2-004 ff.);
5. Verify financial and pertinent information using the prudent person principle;
6. Verify medical eligibility for the MHCP Title V and Genetically Handicapped Persons' Program (see 467 NAC 2-003 ff.);
7. Submit cases requiring medical review for approval of medical care to the Central Office;
8. Notify clients, families/individual, appropriate staff, providers, and clinic personnel of children assigned to a particular clinic;
9. Attend MHCP clinics as assigned and function as the social services coordinator member of the clinic team, and as the Department's representative. Dictate narrative of the interview with the family at the clinic as part of the clinic report;
10. Function as the lead services coordinator at MHCP-sponsored clinics, when assigned;
11. Collaborate with the nurse clinic coordinator on scheduling children into the clinic, regarding lab work, x-rays, or any other pre-clinic evaluations necessary, as well as determining what information/reports are needed from other sources to assist in the clinic evaluation process;
12. Collaborate with the nurse clinic coordinator to make sure that recommendations from the previous clinic have been completed, are in progress, or may need further consult with the clinic team before proceeding further;
13. Determine which families need to attend clinic based on priorities dictated by each individual team;
14. Work with families to schedule appointments and provide notification;
15. Assure that medical records are sent to the appropriate clinic staff as required by each individual clinic;
16. Assure that all clinic lists are printed and distributed as required by the lead services coordinator for the clinic;
17. Meet with the family at clinics to discuss the reason for the referral, clinic expectations, program guidelines, family's priorities and concerns, treatment plan, payment sources, and possible resources to meet the needs of the family which may be in addition to the medical needs;
18. Advocate for the family regarding any questions or concerns about the treatment plan;
19. Assist the nurse coordinator in helping the family to understand the team's recommendations and who will assist in follow-up;
20. Collaborate with the nurse consultant to arrange tests for follow-up appointments, or any test results that may need follow-up prior to the next clinic;
21. Work with the family and nurse coordinator to see that the family has the assistance they need to follow through on the recommendations or Individual Treatment Plan;
22. Coordination of Care: Assist the client, parents, or guardian in arranging follow-up care as recommended by the team, encouraging the client, parents, or guardian to make the appointments.

23. Send appropriate authorizations for care, treatment, tests, or equipment;
24. Distribute clinic reports to family and family physicians, schools and other providers as dictated by the family and as is appropriate;
25. Certify cases as medically and financially eligible for MHCP Title V, Genetically Handicapped Persons Program, as assigned;
26. Authorize medical care according to the medical care guidelines in accordance with the individual medical treatment plans as directed by the medical consultant;
27. Conduct personal interviews to assess needs and help families to identify their strengths and areas where assistance may be necessary;
28. Initiate and/or maintain case files and narratives;
29. Perform services coordination and make referrals as needed or requested by the family;
30. Convene teams of community personnel, medical personnel, local agency representatives, school personnel, etc., when necessary to meet the needs of the family in getting all the services they may need;
31. Provide technical assistance about children with special health care needs, consultation and/or coordination to HHS coworkers and community agencies;
32. Work with local community as the contact/expert regarding children with special health care needs to encourage referrals to MHCP/DCP and serve as a resource to the local community; and
33. Coordinate with appropriate programs at the request of the family.

1-004 Grievances and Fair Hearings: The grievance procedure is at the client's option. The individual may contest the decision and request a hearing without following the grievance procedure (see 467 NAC 1-004.04).

1-004.01 Grievance Request: The client or the client's representative who is dissatisfied with any action or inaction with regard to the furnishing or denial of services may file a formal grievance request for administrative review and redetermination within 90 days of that action. This review is made by a member(s) of the administrative staff of the Medically Handicapped Children's Program. The request for review and redetermination must -

1. Be made in writing;
2. State the identifying information, including name and address of the client in whose behalf the review is requested;
3. State the specific cause for the request of the review;
4. Be signed and dated by the person requesting the review; and
5. Be directed to the Administrator, Attention: Medically Handicapped Children's Program Administrative Review Team.

A member of the review team must contact the person who signed the grievance within five working days of receipt of the request. The purpose of this contact is to determine that all existing information regarding the action resulting in the grievance was available to and considered by the Department at the time the decision which resulted in the dissatisfaction was made. The parties submitting the grievance must cooperate to the best of their ability to provide any additional information that may exist.

1-004.02 Review: The review consists of a complete re-examination of all documents and other available information on the case and, if requested by the aggrieved party may include a meeting for an informal discussion of the matter between the aggrieved party, his/her representative (if any), and MHCP administrative staff conducting the review.

1-004.03 Statement of Determination: A written statement of the redetermination and resulting appropriate action by the Medically Handicapped Children's Program must be sent to the person requesting the review within five days after the receipt of appropriate additional information and meeting, if any. An individual who is not satisfied with the decision has the right to request a fair hearing on the decision. If the child is found eligible, MHCP will authorize payment for covered services provided during the grievance procedure.

1-004.04 Request for Administrative Hearing: A client or the client's representative may contest any action or inaction with regard to MHCP, including a decision resulting from a grievance within 90 days of the date of the action or inaction. The request for fair hearing must follow 465 NAC 2-001.02 and 6-000.

1-005 Residence and Citizenship: There are no durational or legal residence requirements or citizenship requirements for clients served by MHCP.

1-006 Summary of Forms: The following forms are used for Title V Services for Medically Handicapped Children, the Genetically Handicapped Person's Program, and the SSI Disabled Children's Program. Instructions for these forms are contained in the appendix.

<u>Form #</u>	<u>Form Title</u>	<u>Appendix Reference</u>
MHC-10	Client Information	467-000-20
MHC-11	Medical Eligibility Determination Inquiry and/or Clarification of Coverage	467-000-21
MHC-13	Medically Handicapped Children's Program Phone Referral	467-000-23
MHC-14	Appointment Notice	471-000-24
MHC-16	Exchange of Information	467-000-26
MHC-24	SSI-Disabled Children's Program Billing Document	471-000-34
MHC-34	Eligibility Computation	467-000-44
MHC-44	MHCP Service and Device Application	467-000-13
MHC-49	Appointment Postcard	467-000-59
MHC-110	Referral Form	467-000-120

1-007 Title Organization: This title is organized as follows:

1. Chapter 1-000, "Administration;"
2. Chapter 2-000, "Referral, Application, and Eligibility,"
3. Chapter 3-000 (Reserved);
4. Chapter 4-000, "Title V Services for Medically Handicapped Children;"
5. Chapter 5-000, "The Genetically Handicapped Persons' Program;"
6. Chapter 6-000, "The Supplemental Security Income Disabled Children's Program (SSI-DCP);" and
7. Chapter 7-000, "MHCP Providers."